

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: MICROFLUIDIC PROTEIN CRYSTALLOGRAPHY

Attorney Docket Number:: 20174C-004940

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 17B

Total Drawing Sheets:: 60

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One:: NSF

National Institute of Health Grant CA 77373

NSERC

David H. and Lucille M. Packard Foundation  
G. Harold and Leila Y. Mathers Charitable  
Foundation

Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type: Inventor  
Primary Citizenship Country: Canada  
Status: Full Capacity  
Given Name: Carl  
Middle Name: L.  
Family Name: Hansen  
Name Suffix:  
City of Residence: Pasadena  
State or Province of Residence: CA  
Country of Residence: US  
Street of Mailing Address: 438 S. Catalina, #204  
City of Mailing Address: Pasadena  
State or Province of mailing address: CA  
Country of mailing address: US  
Postal or Zip Code of mailing address: 91106

Applicant Authority Type: Inventor  
Primary Citizenship Country: United Kingdom  
Status: Full Capacity  
Given Name: Emmanuel  
Middle Name:  
Family Name: Skordalakes  
Name Suffix:  
City of Residence: Berkeley  
State or Province of Residence: CA

Country of Residence:: US  
Street of Mailing Address:: 2414 Telegraph Avenue  
City of Mailing Address:: Berkeley  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94704

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Denmark  
Status:: Full Capacity  
Given Name:: Morten  
Middle Name::  
Family Name:: Sommer  
Name Suffix::  
City of Residence:: Copenhagen NV  
State or Province of Residence::  
Country of Residence:: Denmark  
Street of Mailing Address:: Tagensvej 179, 3 th.  
City of Mailing Address:: Copenhagen NV  
State or Province of mailing address::  
Country of mailing address:: Denmark  
Postal or Zip Code of mailing address:: DK02400

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: James  
Middle Name:: M.  
Family Name:: Berger  
Name Suffix::  
City of Residence:: Kensington

State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 47 Arlington Ct.  
City of Mailing Address:: Kensington  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94707

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Stephen  
Middle Name:: R.  
Family Name:: Quake  
Name Suffix::  
City of Residence:: San Marino  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 744 Plymouth Road  
City of Mailing Address:: San Marino  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 91108

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number::

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/117,978	04/05/02
	Non-Provisional of	60/323,524	09/17/01
	Continuation-in-part of	09/887,997	06/22/01
09/887,997	Continuation-in-part of	09/826,583	04/06/01
	Non-Provisional of	10/265,473	10/04/02
	Non-Provisional of	60/433,160	12/13/02
	Non-Provisional of	60/447,157	02/12/03

**Foreign Priority Information**

Country::	Application number::	Filing Date::
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**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::